

249H.8 PACE and pre-PACE programs.

For the purposes of this chapter, all of the following apply to a PACE program:

1. A person operating a PACE program shall have a PACE program agreement with the centers for Medicare and Medicaid services of the United States department of health and human services, shall enter into a contract with the department of human services, and shall comply with 42 U.S.C. § 1396(u)(4) and all regulations promulgated pursuant to that section.
 2. Services provided under a PACE or pre-PACE program shall be provided on a capitated basis.
 3. A pre-PACE program may contract with the department of human services to provide services to individuals eligible for medical assistance, on a capitated basis, for a limited scope of the PACE service package through a prepaid health plan agreement, with the remaining services reimbursed directly to the service providers by the medical assistance or federal Medicare programs.
 4. PACE and pre-PACE programs are not subject to regulation under chapter 514B.
 5. A PACE or pre-PACE program shall, at the time of entering into the initial contract and of renewal of a contract with the department of human services, demonstrate cash reserves in an amount established by rule of the department to cover expenses in the event of insolvency.
- 2000 Acts, ch 1004, §8, 22; 2000 Acts, ch 1232, §62; 2002 Acts, ch 1050, §27